FORM D \$30 Mail Wall Processing Section UNITED STATES
SECURITIES AND EXCHANGE COMMISSION
Washington, D.C. 20549

AUG 18 2008

FORM D

OMB APPROVAL
OMB Number: 3235-0076
Expires: May 31,2008
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hours per response.....16.00

Washington, DC

NOTICE OF SALE OF SECURITIES
PURSUANT TO REGULATION D,
SECTION 4(6), AND/OR
UNIFORM LIMITED OFFERING EXEMPTION

SEC USE ONLY					
Prefix	Serial				
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	ı I				

	
Name of Offering (check if this is an amendment and name has changed, and indicate change.) AB/Edge D4-A13 Completion	
Filing Under (Check box(es) that apply): Rule 504 Rule 505 Rule 506 Section 4(6) Type of Filing: New Filing Amendment	D M OLOE
A. BASIC IDENTIFICATION DATA	
1. Enter the information requested about the issuer	
Name of Issuer (check if this is an amendment and name has changed, and indicate change.)	
Synergy Resources, LLC	
Address of Executive Offices (Number and Street, City, State, Zip Code) 2300 Valley View Lane, Ste. 225, Irving, TX 75062	Telephone Number (Including Area Code) 972-823-9205
Address of Principal Business Operations (Number and Street, City, State, Zip Code) (if different from Executive Offices) PROCESSED	Telephone Number (Including Area Code)
Oil & Gas Exploration & Development	
Type of Rusiness Organization Corporation business trust Dimited partnership, already formed Dimited partnership, to be formed	j jariji ratidi jajil ratidi atidi atidi atidi atidi atidi atija sessima.
Actual or Estimated Date of Incorporation or Organization: Month Year Actual or Estimated Date of Incorporation or Organization: O S	08055659 mated e: □⊠

GENERAL INSTRUCTIONS

Federal:

Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6), 17 CFR 230.501 et seq. or 15 U.S.C. 77d(6).

When To File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address.

Where To File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549.

Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the Appendix need not be filed with the SEC.

Filing Fee: There is no federal filing fee.

State:

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix to the notice constitutes a part of this notice and must be completed.

- ATTENTION -

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predictated on the filing of a federal notice.

		A. BASIC IDE	NTIFICATION DATA		
2. Enter the information rec	uested for the fol	lowing:			
		uer has been organized w			
					faclass of equity securities of the issuer.
• Each executive office	cer and director of	f corporate issuers and of	corporate general and man	aging partners of	partnership issuers; and
 Each general and m 	anaging partner o	f partnership issuers.			
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first, if	individual)				
Hines, Matt (Senior Par	tner)		<u> </u>		
Business or Residence Addres	s (Number and	Street, City, State, Zip Co	ode)		
2300 Valley View Lane	, Ste. 225, Irvi	ing, TX 75062			
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first, if	individual)				
Kelley, Justin (Senior P					
Business or Residence Addres			ode)		
2300 Valley View Lane	, Ste. 225, Irv	ing, TX 75062			
Check Box(es) that Apply:	Promoter	Beneficial Owner	X Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first, if	f individual)				
Lowe, Sean (Senior Vic	ce President of	Operations)			
Business or Residence Addres			ode)		
2300 Valley View Lane	e, Ste. 225, Irv	ing, TX 75062			
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first, if	f individual)				
Edge, Fred Jr. (Supervi	sor of Field O	perations)			
Business or Residence Addre	ss (Number and	Street, City, State, Zip Co	ode)		
2300 Valley View Land	e, Ste. 225, Irv	ing, TX 75062			
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first, i	f individual)				
Business or Residence Addre	ss (Number and	Street, City, State, Zip C	ode)		
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first, i	f individual)				
Business or Residence Addre	ss (Number and	Street, City, State, Zip C	ode)		
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first, 1	f individual)			· · · · · · · · · · · · · · · · · · ·	
Business or Residence Addre	ss (Number and	Street, City, State, Zip C	ode)		
	(Use bla	ank sheet, or copy and use	additional copies of this s	iheet, as necessary	γ)

	 											
<u> </u>				В. г	N /O R MAT	TON ABOU	T OFFER	NG				
1. Has the issuer sold, or does the issuer intend to sell, to non-accredited investors in this offering?						Yes	No					
l. Has th	e issuer sol	d. or does t								*************		X
	Answer also in Appendix. Column 2. if filing under ULOE.								10	500.00		
2. What	2. What is the minimum investment that will be accepted from any individual?								\$ 12,500.00			
								Yes	No			
										lirectly, any the offering.		
										with a state		
or state	es, list the n	ame of the t	broker or d	ealer. If m	ore than fiv	e (5) perso	ns to be lis	led are asso		sons of such		
· a brok	er or dealer	r. you may s	set forth th	e informat	ion for that	broker or	dealer only	y				
	(Last name	first, if ind	lividual)									
N/A	- · · ·			10	T. A							
Business of	r Residence	Address (1	Number an	d Street, C	ily, State, 2	Zip Code)						
Name of A	scociated B	roker or De	nalae									
Name of A	ssociated D	HOKEL OF 126	aici									
States in W	hich Perso	n Listed Ha	s Solicited	or Intend	to Solicit	Purchasers						
(Check	States in Which Person Listed Has Solicited or Intends to Solicit Purchasers (Check "All States" or check individual States)										l States	
(0	CHECK ANI SIGIES OF CHECK INCLYTONG STATES)									☐ //// .hates		
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MT	NE	NV	NH	ИJ	NM	NY	NC	ND	OH	OK	OR	PΛ
RI	SC	[SD]	TN	TX	UT	VT	VA	WA	WV	(WI)	WY	PR
Full Name	(Last name	first, if ind	ividual)			···-	-					
Business o	r Residence	e Address (1	Number an	id Street. C	City, State.	Zip Code)						
Name of A	ssociated B	roker or De	aler									
C+-+ ! 111	W. I. D.		5 11 1. 1		. 6 11 1							
States in W												
(Check	"All State	s" or check	individual	States)	•••••		• • • • • • • • • • • • • • • • • • • •		***************************************	=======================================	□ VI	l States
ΛL	ΛK	ΛZ	ΛŔ	CA	CO	CT	DE	DC	FL	GΛ	H	ā
	IN		KS	KY		ME	MD	MΛ	MI	MN	MS	MO
MI	NE	NV	NH	[N]	NM)	NY	NC	ND	OH	OK)	OK)	PA)
RĪ	SC	SD	TN	TX	UT	VT	VΛ	WA	WV	wī	WY	PR
Full Name	(Last name	first, if ind	ividual)									
Business o	r Residence	Address (1	Number an	d Street, C	ity, State.	Zip Code)			- · <u>, </u>			
Name of As	sociated B	roker or De	aler									_
												
States in W												
(Cneck	. All State:	s" or check	individual	states)	**************	***************	************	*** **** *** *** ***	• • • • • • • • • • • • • • • • • • • •	***************	□ vi	l States
ΛL	ΛK	ΛZ	AR	CA	CO	[CT]	DE	DC	FL	GΛ	HI	(D)
TL.	IN		KS	KY	LA	ME	MD	MΛ	MI	MN	MS	MO
MT	NE	NV	NH	NJ	NM	NY	NC	ND	OH	OK	OR	PΛ
RI	SC	SD	TN	TX	UT	VT	VΛ	WA	WV	WI	WY	PR

C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS

1.	Enter the aggregate offering price of securities included in this offering and the total amount already sold. Enter "0" if the answer is "none" or "zero." If the transaction is an exchange offering, check this box and indicate in the columns below the amounts of the securities offered for exchange and already exchanged.			
	Type of Security	Aggregate Offering Pri		Amount Already Sold
	Debt	s		s
	Equity			
	Common Preferred			
	Convertible Securities (including warrants)			s
	Partnership Interests			
	Other (Specify Working Interests			
	Total	·	—	s
	Answer also in Appendix. Column 3, if filing under ULOE.			
2.	Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero."			Ágoreante
		Number Investors		Aggregate Dollar Amount of Purchases
	Accredited Investors	6		\$ 200,000.00
	Non-accredited Investors			S
	Total (for filings under Rule 504 only)			\$
	Answer also in Appendix, Column 4, if filing under ULOE.			
3.	If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C — Question 1.			
	Type of Offering	Type of Security		Dollar Amount Sold
	Rule 505			s
	Regulation A		_	\$
	Rule 504			s
	Total			<u></u>
4	a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the insurer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate.		_	7
	Transfer Agent's Fees	•••••	П	s _
	Printing and Engraving Costs			5
	Legal Fees			\$
	Accounting Fees			
	Engineering Fees			\$
				\$
	Sales Commissions (specify finders' fees separately)			\$
	Other Expenses (identify)			\$
	Total	• • • • • • • • • • • • • • • • • • • •		s _n/a

	C. OFFERING PRIC	E, NUMBER OF INVESTORS, EXPENSES AND USE O	F PROCEEDS	
	and total expenses furnished in response to P	rate offering price given in response to Part C — Question Part C — Question 4.a. This difference is the "adjusted gro	220	\$ <u>245,000.00</u>
5.	each of the purposes shown. If the amoun	gross proceed to the issuer used or proposed to be used I nt for any purpose is not known. furnish an estimate a e total of the payments listed must equal the adjusted gro e to Part C — Question 4.b above.	nd	
			Payment	
			Office Director Affiliate	s. & Payments to
	Salaries and fees		🗆 s	🗀 \$
	Purchase of real estate	, , , , , , , , , , , , , , , , , , ,	🗆 \$	D\$
	Purchase, rental or leasing and installation	n of machinery		5.
	• •	4.0.10.1	_	
	• •	and facilities	□\$	— ⊓,———
	Acquisition of other businesses (including offering that may be used in exchange for	the assets or securities involved in unis		
			🗆 S	D\$
	Repayment of indebtedness	······································	🗆 \$	O\$
	Other (specify): Completion Costs		_ 🗆 \$	<u>S 245,000.00</u>
			-	
			_	_
	Column Totals		s	<u>×245,000.00</u>
	Total Payments Listed (column totals add	ed)	🛭	\$ <u>245,000.00</u>
		D. FEDERAL SIGNATURE		
sig	nature constitutes an undertaking by the issu	ed by the undersigned duly authorized person. If this not er to furnish to the U.S. Securities and Exchange Common- non-accredited investor pursuant to paragraph (b)(2) o	nission, upon of Rule 502.	ler Rule 505, the following written request of its staff
	uer (Print or Type)	Signature	Date	7 25
1550			يسك ا	7-08
	nergy Resources, LLC	IV WOOD I	0	(/ (/)
Sy	nergy Resources, LLC ne of Signer (Print or Type)	Title of Signer (Print or Type)	10.	

END

- ATTENTION ---

Intentional misstatements or omissions of fact constitute federal criminal violations. (See 18 U.S.C. 1001.)